WV I/DD Waiver Services, Units, Rates and Limitations

| | Service | Ratio | Code | Unit | Rate | Temp. Rate Increase (4.1.22-as specified under Appendix K) | Annual Service Limit- Units | NF Age 3-17 Limit-Units | NF Age 18+ Limit-Units | ISS/GH Limit-Units |
|----------------|---|-------|----------|--------|---------|---|--|--|---------------------------|--|
| | Home-Based PCS**** | 1:1 | S5125 U7 | 15 min | \$5.45 | n/a | | | | |
| | | 1:2 | S5125 U8 | 15 min | \$2.73 | n/a | Dependent on age and living arrangement | | | |
| | Family PCS | 1:1 | S5125 U5 | 15 min | \$2.74 | n/a | | | | 35,040 15-minute units (w/o "indirect" LPN) |
| | | 1:2 | S5125 U6 | 15 min | \$1.37 | n/a | | | | |
| | PCS - Personal Options**** | 1:1 | S5125 UA | 15 min | \$2.74 | n/a | | 7,320 | | |
| | Crisis Site PCS | 1:1 | T1005 U7 | 15 min | \$5.72 | \$8.18 | | | | |
| | | 1:2 | T1005 U8 | 15 min | \$2.87 | \$4.10 | 2,880 | | | |
| | | 1:3 | T1005 U9 | 15 min | \$1.91 | \$2.73 | | | | |
| | Crisis Intervention | 2:1 | T2017 | 15 min | \$10.00 | n/a | 1,344 | | | |
| | Skilled Nursing by LPN | 1:1 | T1003 U4 | 15 min | \$11.02 | n/a | 2,920 if in GH or ISS UNLESS in a 3 person | | uty Service) | |
| | | 1:2 | T1003 U3 | 15 min | \$5.50 | n/a | ISS when all persons receive 11,680 units | n/a - access Private Duty Nursing when | | |
| Services | | 1:3 | T1003 U2 | 15 min | \$3.67 | n/a | Those in NF are dependent on age and medical condition | under age 21 | | |
| eZ | Facility-Based Day Habilitation | 1:1-2 | T2021 U5 | 15 min | \$5.23 | \$7.47 | | units | (W/O IIIdilect LFIV) | |
| Direct Care Se | | 1:3-4 | T2021 U6 | 15 min | \$2.24 | \$3.20 | 6,240 n/a | n/a | (with Day Service) | -OR- 35,280 15-minute units (with "indirect" LPN) |
| | | 1:5-6 | T2021 U7 | 15 min | \$1.42 | \$2.03 | | | | |
| | Job Development | 1:1 | T1019 HB | 15 min | \$5.26 | \$7.52 | 6,240 | n/a | | |
| | Pre-vocational Training | 1:1-2 | T2021 U1 | 15 min | \$5.23 | \$7.47 | | | | |
| | | 1:3-4 | T2021 U2 | 15 min | \$2.24 | \$3.20 | 6,240 n/a | n/a | | |
| | | 1:5-6 | T2021 U3 | 15 min | \$1.42 | \$2.03 | | | | |
| | Supported Employment | 1:1 | T2019 | 15 min | \$5.26 | \$7.52 | 0.220 | n/a | | |
| | | 1:2+ | T2019 HQ | 15 min | \$2.11 | \$3.02 | 8,320 | n/a | | |
| | Electronic Monitoring (only for unlicensed sites) | 1:1 | S5161 U1 | 1 hour | \$9.08 | n/a | | 2,920 NF 5,840 ISS/GH n/a | | |
| | | 1:2 | S5161 U2 | 1 hour | \$4.54 | n/a | - | | | |
| | | 1:3 | S5161 U3 | 1 hour | \$3.03 | n/a | | | | |
| | | 1:4 | S5161 U4 | 1 hour | \$2.27 | n/a | | | | |
| | Licensed Group Home PCS | 1:1 | S5125 U1 | 15 min | \$5.72 | \$8.18 | | n/a n/a | | |
| | | 1:2 | S5125 U2 | 15 min | \$2.87 | \$4.10 | Dependent on age and living arrangement | | n/a | |
| | | 1:3 | S5125 U3 | 15 min | \$1.91 | \$2.73 | | | | |
| | | 1:4 | S5125 U4 | 15 min | \$1.43 | \$2.04 | | | | |
| | Unlicensed Residential PCS | 1:1 | S5125 HI | 15 min | \$5.72 | \$8.18 | | | | |
| | | 1:2 | S5125 UN | 15 min | \$2.87 | \$4.10 | Dependent on age and | | | |
| | | 1:3 | S5125 UP | 15 min | \$1.91 | \$2.73 | living arrangement | | | |
| | Unlicensed Residential PCS - Personal Options | 1:1 | S5125 UD | 15 min | \$2.74 | n/a | Dependent on age and living arrangement | | | |
| Respite | In-Home Respite**** | 1:1 | T1005 UA | 15 min | \$5.01 | n/a | 3,650 3,650 | | | |
| | | 1:2 | T1005 UB | 15 min | \$2.50 | n/a | | | | |
| | In-Home Respite - Personal Options**** | 1:1 | T1005 UD | 15 min | \$2.74 | n/a | | | | |
| | Out-of-Home Respite | 1:1 | T1005 U1 | 15 min | \$5.01 | n/a | | 3,650 | 3,650 | n/a |
| | | 1:2 | T1005 U5 | 15 min | \$2.50 | n/a | | | | |
| | | 1:3 | T1005 U6 | 15 min | \$1.67 | n/a | | | | |
| | Out-of-Home Respite - Personal Options | 1:1 | T1005 UC | 15 min | \$2.74 | n/a | | | | |

WV I/DD Waiver Services, Units, Rates and Limitations

| | Service | Ratio | Code | Unit | Rate | Temp. Rate Increase (4.1.22-as specified under Appendix K) | Annual Service Limit- Units | NF Age 3-17 Limit-Units | NF Age 18+ Limit-Units | ISS/GH Limit-Units |
|----------------|---|------------|----------------------|------------------|--------------------|---|--------------------------------|----------------------------|---------------------------|--------------------|
| CM | Case Management Natural Family/SFC Home**** | n/a | G9002 U3 | Event | \$200.00 | n/a | 12 | 12 | 12 | 12 |
| | Case Management ISS/Group Home**** | n/a | G9002 U4 | Event | \$250.00 | n/a | 12 | 12 | 12 | 12 |
| | Behavior Support Professional I Behavior Support Professional II | n/a n/a | T2021 HN T2025 HO | 15 min 15 min | \$10.41 \$14.90 | n/a n/a | 768 | 768 | 768 | 768 |
| IPP Planning | Behavior Support Professional I - IPP Planning | n/a | T2024 HI | Event | \$53.74 | n/a | 4 | 4 | 4 | 4 |
| | Behavior Support Professional II - IPP Planning | n/a | T2024 111 | Event | \$78.76 | n/a | | | | |
| PP PP | Skilled Nursing by Registered Nurse - IPP Planning | n/a | T2024 TD | Event | \$80.34 | n/a | 4 | 4 | 4 | 4 |
| RN | Skilled Nursing by Registered Nurse | n/a | T1002 HI | 15 min | \$16.28 | n/a | 480 | 480 | 480 | 480 |
| 1414 | Dietary Therapy* | n/a | 97802 AE | 15 min | \$24.58 | n/a | 416 | 416 | 416 | 416 |
| | Dietary Therapy* - Personal Options | n/a | 97802 AE UG | 15 min | \$24.58 | n/a | | | | |
| | Physical Therapy* | n/a | 97530 GP | 15 min | \$24.83 | n/a | | | | |
| lan | Physical Therapy* - Personal Options | n/a | 97530 GP UG | 15 min | \$24.83 | n/a | | | | |
| Ex State Plan | Occupational Therapy* | n/a | 97530 GO | 15 min | \$24.83 | n/a | | | | |
| E | Occupational Therapy* - Personal Options | n/a | 97530 GO UG | 15 min | \$24.83 | n/a | | | | |
| | Speech Therapy* | n/a | 92507 GN | Event | \$52.60 | n/a | Dependent on age | 96 | 48 | 48 |
| | Speech Therapy* - Personal Options | n/a | 92507 GN UG | Event | \$52.60 | n/a | | | | |
| | Participant-Directed Goods and Services - Personal Options | n/a | T2028 SC | \$1 | \$1.00 | n/a | 1000 | 1000 | 1000 | 1000 |
| 4 | Environmental Accessibility Adaptation-Home | n/a | S5165 | \$1 | \$1.00 | n/a | | | | |
| PDGS, EAA | Environmental Accessibility Adaptation-Home - Personal Options | n/a | S5165 UG | \$1 | \$1.00 | n/a | | | | |
| PD | Environmental Accessibility Adaptation-Vehicle | n/a | T2039 | \$1 | \$1.00 | n/a | | | | |
| | Environmental Accessibility Adaptation-Vehicle - Personal Options | n/a | T2039 UG | \$1 | \$1.00 | n/a | | | | |
| ion | Transportation: Miles** | n/a | A0160 U1 | 1 mile | \$0.42 | n/a | 9,600 | 9,600 | 9,600 | 9,600 |
| Transportation | Transportation: Miles - Personal Options** | n/a | A0160 U3 | 1 mile | \$0.42 | n/a | | | | |
| | Transportation: Trips (max 2 one-way trips per day)** | n/a | A0120 HI | 1 trip | \$8.31 | n/a | 520 | 520 | 520 | 520 |

^{*}Rate based on RBRVS and subject to change

^{**}Rate based on state mileage reimbursement and subject to change

^{***}In order to accommodate for "indirect" LPN activities, the annual service limit during a leap year is 35,376 units and only applies to those residing in ISS/GH settings

^{****}Service code is billed through the use of Electronic Visit Verification (EVV)